

STATE TESTED NURSING ASSISTANT AGREEMENT FORM

ATTENDANCE:

IS MANDATORY!! No absences permitted due to short duration of class. If there are any days missed for whatever reason; you will have 60 days from your first day of class to make up those missed days. There will be a \$25 fee per day assessed for any needed make-up day. Also, tardiness (15 minutes or more) will result in student being sent home & required to make up a full day of class. If you do not complete your certification within 60 days of the first day of your class, you will be required to re-enroll for the class and responsible for full payment in order to be certified and eligible to take the State Test.

CLASS HOURS:

Morning Class is Monday through Friday, 8:30am to 3:00pm x 12 days.

Evening Class is Monday through Friday, 5:30pm to 10:30pm x 14 days.

Morning Class-½ hour lunch and 10-15 minute breaks are included

Evening Class- One 15 to 20 minute break

CLINICAL HOURS:

Clinicals for the Morning and Evening classes are usually held on the 2nd weekend from 6:00am to 2:00pm or 2:30pm to 10:30pm. If there are more than 8 students, clinicals may be split into 2 groups. The final decision will be left to the Administrator or Instructor and is based on the overall needs of the class.

DISCLAIMER:

Classes are scheduled and it is assumed they shall be carried out as such. However, there may be an occasion where illness or other emergencies might attribute to the untimely absence of the Class Instructor. In such instances, at the discretion of the School Administrator, class hours (or clinical hours) may be extended to compensate hours lost. Rarely is this a concern and we certainly do not want to create any type of schedule changes or hardships on our students, so please bear with us should we need to adjust the schedule.

Winter months can be unpredictable. When inclement weather conditions occur delays or/closings will be posted on our website class calendar; go to **www.pchslive.com**.

REQUIRED ATTIRE:

Navy blue scrubs (top and bottom). This can be purchased from PCHS for a fee of \$20 per set. Shoes must be tennis shoe type (NO CLOGS, OR OPEN TOE). **Uniforms are Mandatory and are to be worn to class and clinical sessions at all times.** Students who violate this policy will be sent home and will have to make up those missed days. All policies surrounding missed days will be applicable.

HEALTH SCREENING REQUIREMENTS:

Each student must have a negative 1-step Mantoux (TB skin test) prior to attending clinical at the student's expense. We currently offer the TB testing at our location for \$20. You can get the TB done elsewhere. Upon registration you can download and print the Mantoux form <https://www.pchslive.com/HealthCertificateForm.pdf> to be filled out by the individual giving the test. If this requirement is not completed, you will not be permitted to attend the clinical portion of the program, therefore you will not receive a completion certificate nor will a refund of fees paid be issued. If you have already had a TB Test done, it must have been done within a 3 months' time to fulfill this requirement. A physical is also required prior to clinical. The physical can be as simple as a doctor's prescription pad with your Dr.'s signature and his agreement that you are physically able to attend an STNA class/clinical without any restrictions.

STUDENT CONDUCT PHILOSOPHY:

- Students shall attend class on a regular basis and be in class on time.
- Students shall follow directives, directions, and procedures at all times.
- Be prepared for class.
- Produce your highest quality work.
- Take notes, read assignments and study daily.
- Ask questions and seek help when needed.

- Participate in class respectfully. **Any disruptive behavior, disrespect for the instructors or peers, or consistent disregard for school policies (i.e. cell phone use in class), will constitute immediate dismissal from the program which is non-refundable.**

STUDENT IDENTIFICATION (I.D.'s):

Every student will be issued an identification card with his/her name. A student must have their I.D. card in their possession at all times while at school or at clinical. Failure to possess the I.D. for admission to a clinical event may result in the student not being admitted to the event. Students should report lost or stolen cards to the receptionist. The first lost/stolen card replacement is \$5.00. A second lost/stolen card has a \$10.00 replacement fee. No temporary Student I.D. card is available during the replacement time. A student who lends or uses another's I.D. card will be referred to the Student's Coordinator for disciplinary action.

THEFT/LOST AND STOLEN ITEMS:

Any school books, equipment, or clothing items checked out to a student that are lost/stolen are the responsibility of the student and his/her parent/guardian and must be replaced/purchased at the current replacement cost. PCHS and its staff members are not responsible for personal items that are lost or stolen on company premises or at clinicals.

A student shall not take, use, or borrow any property by misrepresentation, deception, or by expressed or implied threat. A student shall not take, use, or borrow property belonging to another person without his/her permission.

STATE TEST:

All students are required to pass the final review test given at the end of the course with at least 80% score before they are permitted to register to take the state test. **The total cost for the state test is \$100.** There are 2 parts to the state test: written & skills. You have 2 years after your certification to sit for your state test.

TEXTBOOK:

The school furnishes textbooks to all students on a lease basis. The textbook is leased in order to keep the cost of the program down. Each student must make it a point to keep their book with them at all times. Replacement for lost or stolen textbook is \$33 and can be purchased at the reception counter. Workbooks are also available to purchase for study purposes. Textbooks are to be returned in good condition on the final day of class. Failure to do so will result in collection action against you.

PAYMENT INFORMATION:

Each student must pay a minimum of \$200 deposit at the time of enrollment. This deposit is non-refundable. If you pay full tuition at registration the same rule applies; \$200 is non-refundable, however, you will be given 60 days in which to reschedule a start date – in which case your full payment will be applied towards tuition. If you begin a class & drop out, no money will be refunded to you. We are unable to refill a student's slot if a class is dropped, so tuition is automatically forfeited. Students who have paid a non-refundable deposit and/or tuition may be subject to an additional \$100 cancellation fee, if Cancellations are not received by our offices at least 48 business hours before the start of the class for which they are enrolled. Cancellations must be received in writing by e-mail (PCHS@live.com Subject: Cancellation), fax (614-896-6423 ATTN: Administrator) or by U.S. mail (1901 E Dublin Granville Rd Columbus, OH 43229 ATTN: Administrator.) No refunds will be made for requests received after that time. Refunds may be issued in the same form payment was made. Please allow two weeks for processing. Registrants who cancel **must return** all seminar materials.

The remaining \$215 balance of the \$415 tuition fee will be due prior to the first clinical class. Otherwise an additional \$50 will be assessed to the total balance. In addition, you will be charged \$5 per day for any day(s) after the due date. Please contact a PCHS representative for information about payment plans prior to submitting your application. PCHS accepts cash, cashier's checks, money orders, debit and credit cards. Deposits or other payments can be mailed or delivered in person at 1901 E. Dublin Granville Rd, Columbus OH 43229.

There are instances where a **"special price" is offered. In that event, in order to take advantage of a "special price", the full price will be due & payable on or before the first day of the upcoming class.**

For example: If the "special price" is \$385 and you choose to do payment plans, your total cost will be \$415 (\$385 + \$30). **In short, payment plans are NOT included in "special price" offerings.**

COMPUTER AND INTERNET USE:

Use of the Internet and computers requires efficient, ethical, and legal use of network resources. If a student violates any of these guidelines, their eligibility for using the computer will be terminated and future access to the Internet and computers will be denied. Violation of these guidelines may also result in further disciplinary action.

FALSE IDENTIFICATION:

Students shall always provide accurate identification of who they are. When requested, students will always respectfully provide a staff member, chaperone, or law enforcement officer with their school identification card.

PROFANITY:

Students shall refrain from using any form of profanity (verbal or written) at all times. Students will be pulled aside and spoken to if improper language is an ongoing problem. If an agreement cannot be reached (re: poor language) student will be asked to leave the class. In such cases PCHS will not refund any deposit made.

SEXUAL HARASSMENT:

The unwelcome sexual advances, request for sexual favors, and any other verbal or physical conduct of a sexual nature by a student to another student or by a student to a staff member will not be tolerated.

WEAPONS:

A student shall not knowingly, intentionally, or recklessly go onto school premises with a firearm, explosives, knife, or any other weapon (real or fake) without written authorization by an administrator. Violators are subject to required withdrawal and may be referred to the appropriate law enforcement authority.

COPIES OF RECORDS

All copies of the course as well as medical records are kept on file for 2 years.

Students are given copies on completion of course. If any additional records are needed after course completion, a written request must be made to our email address at pchs@live.com. The requested copies can be picked up, faxed or emailed. Please note that there is a \$5 processing fee assessed.

PREMIER CHOICE HEALTH SERVICES, LLC

1901 E. DUBLIN-GRANVILLE RD.

COLUMBUS, OHIO 43229

PHONE: (614) 896-6420

Fax: (614) 896-6423

My signature below indicates that I have read, understand and agree to the terms and conditions of the Policy and Procedure Agreement information form given to me by Premier Choice Health Services STNA Program.

Students name (print)

Date

Students Signature